1. aanvrager

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	1									
aa nvrager	D project	Dijiogen								
LI CONTACT PERSON										
-										
You can check your personal data here. The name and e-mail address are part of your account name. This data can only be changed by the Fund, by sending an e-mail to helpdesk@stimuleringsfonds.nl										
Name contact p	erson									
E-mail contact p	erson									
Telephone num	ber contact pers	on								
	Would you like to receive all correspondence concerning this application in English?									
				O No						
(.2 ORGANIZATIO	N									
Your organizati	ion is registered i	in our system wit	th this data. The na	ame of the organization is part of the account name. This data can only be changed by the Fund, by sending an e-mail to						
helgdesk@stim	hear organization in given a monthly and the data in the name of the organization of part of the data with the dat									
Name of the org	anization									
Registered nam			the Chamber							
of Commerce.	Name of the organization as it is registered with the Chamber of Commerce.									
Visiting address	•									
Postal address										
General e-mail a	address									
General phone r	number									
Website				a 50						
How many full-t organization at t Please fill out a	the time of apply	ving?								
BANK DETAILS										
We ask your bank details in advance so that we can process the decision if applicable in our records as soon as possible.										
Is the bank acco exist, please sel with the necess	lect "No" to activ	vate the fields a		 Yes No 						
Bank account n	umber									
Foreign bank ac	count SWIFT/BI	с								
Account holder	name <u>o</u>									
Bank name										
Address and cit	v hank (for not l	BAN countries)	•	SY						

Chamber of Commerce. If you are not yet registered, you must provide an official extract as soon as possible, within 8 weeks after the closing date. C.SUMMARY Application number and grant programme Call Applicant Location and website	
must provide an official extract as soon as possible, within 8 weeks after the closing date	
must provide an official extract as soon as possible, within 8 weeks after the closing date3 SUMMARY Application number and grant programme Call	
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ust provide an official extract as soon as possible, within 8	
o receive a grant, the organization must be registered with a ONO	
Do you have an official Chamber of Commerce registration? Yes	



2. project

Questions with a * are required. Please refrain from using special characters like quotes and slashes.

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Canvrager Oproject Chillegen Cyaldering						
2.1 APPLICATION INFORMATION						
Application number and grant programme	Vormgeving / Design					
Call						
2.2 SUBSIDY REGULATIONS						
Did you take notice of the Subsidy Regulations?						
2.3 PROJECT						
What is the project title?	Projectite					
Provide a brief summary of your project. Describe what the project or programme entails, what the in	tended end result is and the parties with which there is collaboration.*					
(Yeu may enter up to 1566 chars.)						
1500 characters kit	- <u>-</u>					
How many full-time equivalents are employed by your organization at the time of applying? Please till out a numercal value (max. 2 declmals) *						
What is the end date of the project?	d v m v y m					
A project may not last longer than 24 months, i.e. 2 years. The period of 24 months begins on the date the Fund takes an official decision about your grant application. Phase 1 of Digital Heritage x Public has a period of 3 months						
TYPE OF PROJECT						
Select the type of project / activity	no value 🗸					
Are you applying for a <u>starting grant</u> , to explore the options for a project? *						
	 Yes No 					
The grant is a maximum of € 7,500. Co-funding is not compulsory for a starting grant. A starting grant is aimed at the initial phase of a sizeable (research) project.						
DISCIPLINES						
Which sub-discipline best fits your project?	no value 🗸					
Do any other sub-disciplines apply?	no value 🗸					
Does the project have an interdisciplinary character or is it a crossover?) Yes					
The Fund considers a project to be interdisciplinary if it involves two or more of the following disciplines: architecture, design, digital culture. A project is a crossover if from one of the disciplines mentioned a relationship is initiated with other cultural disciplines, science or social sectors.	○ No					
PROJECT LOCATION						
In which country does the project mainly take place? $\ ^{\circ}$	no value 🗸					
Does your project involve activities that take place in other countries? If yes, which countries?	nothing selected					

In which city/cities does the project mainly take place? *	
OBJECTIVE	
Which objective as formulated by the Fund corresponds best with your project? The application will be evaluated based on the main objective. *	no value 🐱
Describe how this objective corresponds with your project $\ensuremath{^\circ}$	(You may enter up to 2500 chars.)
	2500 characters left
Add an additional objective, if applicable.	no value 🐱
2.4 FINANCING	
Total project costs	€
Own contribution	
	e
Co-financing consists of:	
- Public revenues and sales	E
- Contributions from private resources	e
(private individuals, businesses, private funds, other contributions)	
 Contributions from public resources (municipal grants or subsidies, grants other culture funds, European grants or subsidies, other contributions) 	6
Total co-financing	E D
Requested amount (= total costs – own contribution – co-financing)	E O
If all the required fields have been completed, you can proceed to upload attachments in the next step	
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save draft	save draft & continue »
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3. bijlagen

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aanvrager project Dijlagen verklaring								
3.1 Uploads								
This section is for uploading the necessary attachments to the application. Make sure all required documents are saved after every upload.								
Project plan/Plan of action Maximum of 10 pages (unless stated otherwise in Open Call text) *	select file to upload : Max File Upload Size (MB): 8 Allowed File Type(s): pdf							
Budget details and planning Maxiumum of 2 pages	select file to upload : Max File Upload Size (NB): 4							
Communication plan Maximum of 2 pages *	Allowed File Type(s): pdf							
CVs of the members of the core team Maximum of 2 pages.	1 select file to upload : Max File Upload Size (MB): 4							
Be aware of privacy-sensitive data. The CVs will be presented to the Advisory Committee.	Aldoved File Type(s): pdf							
Declarations of Intent	± select file to upload :							
	Max File Upload Size (MB): 4 Allowed File Type(s): pdf							
Images/portfolio Maximum of 15 pages	♣ select file to upload :							
	Max File Upload Size (MB): 12 Allowed File Type(s): pdf							
Copy of the articles of association Only applicable if these articles exist for your legal entity	🛓 select file to upload :							
	Max File Upload Size (MB): 4 Allowed File Type(s): pdf							
One representative image for communication purposes (jpg file format, if possible with a resolution of 720 x 480, landscape orientation and 150 dpi) *	± select file to upload :							
	Max File Upload Size (MB): 4 Allowed File Type(s): jpg							
If all attachments have been successfully uploaded you can proceed to the declaration in the next step.								

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4. verklaring

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Daanvräger Oproject Obijidgen Overklaring							
4.1 DECLARATION BY LEGAL REPRESENTATIVE							
I, the authorised signatory of the organization, declare that I have completed the form truthfully and ac Creative Industries Fund NL and the relevant grant programme.	cept the procedure and formal terms and conditions as specified in the Subsidy Regulations of the						
You submit your application for:	Vormgeving / Design						
Project title	Projectitiet						
Name of the organization	1 - etest						
Town/city visiting address							
Name contact person							
E-mail contact person							
Telephone number contact person							
I, the authorised signatory of the organization, declare that I have completed the form truthfully and accept the procedure and formal terms and conditions as specified in the Subsidy Regulations of the Creative Industries Fund NL and the relevant grant programme.							
I declare that I have been authorized by the above-mentioned legal representative of the organization to submit the form on behalf of the organization.							
If all the required fields have been completed, you can proceed to submit the form in the next							
step.							
We are interested in your experiences with the form. Do you have any suggestions for improvement?	· · · · · · · · · · · · · · · · · · ·						
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✓ Draft saved IO:22AM							
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